



# State of New Hampshire 2010 ANNUAL REPORT

The following information shall be given as of January 1  
preceeding the due date Pursuant to RSA 304-C:80.

REPORT DUE BY April 1, 2010

ANNUAL REPORTS RECEIVED AFTER THE DUE DATE  
WILL BE ASSESSED A LATE FEE.

Filed  
Date Filed: 08/27/2010  
Business ID: 614234  
William M. Gardner  
Secretary of State

Blue Orange Learning, LLC

66 Towne House Circle

Pike, NH 03780

## ADDRESS OF PRINCIPAL OFFICE:

66 Towne House Circle

Pike, NH 03780

## REGISTERED AGENT AND OFFICE:

Vivenzio, John F

66 Town House Circle

Pike, NH 03780

ENTITY TYPE: LLC

BUSINESS ID: 614234

STATE OF DOMICILE: NEW HAMPSHIRE

learning, training, software development

If changing the mailing or principal office address, please check the appropriate box and fill in the necessary information.

☐

The new mailing address

☐

The new principal office address

PO Box is acceptable.

## MANAGERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

LIST AT LEAST ONE MANAGER BELOW OR MEMBER ON RIGHT

NAME JOHN VIVENZIO  
STREET 66 TOWNE HOUSE CIRCLE  
CITY/STATE/ZIP PIKE, NH, 03780  
NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP

## MEMBERS

NAME AND BUSINESS ADDRESS (P.O. BOX ACCEPTABLE).

MUST LIST AT LEAST ONE MEMBER BELOW IF NO MANAGERS

NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP  
NAME  
STREET  
CITY/STATE/ZIP

NAMES AND ADDRESSES OF ADDITIONAL MANAGERS/MEMBERS ARE ATTACHED

To be signed by the manager, if no manager, must be signed by a member.

I, the undersigned, do hereby certify that the statements on this report are true to the best of my information, knowledge and belief.

Sign here:

Please print name and title of signer:

JOHN VIVENZIO

1 MANAGER

FEE DUE: \$150.00

E-MAIL ADDRESS (OPTIONAL):

JVIVENZIO@MAC.COM

WHEN THIS FORM IS A  
PUBLIC DOCUMENT AT  
REQUIRED INFORMATION



T1024210004

LL BECOME A  
C DISCLOSURE  
WILL BE REJECTED

MAKE CHECK PAYABLE TO SECRETARY OF STATE

RETURN COMPLETED REPORT AND PAYMENT TO:

New Hampshire Department of State, Annual Reports, P.O. Box 9529, Manchester, NH 03108-9529